Form **8871** (Rev. July 2003)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Department of the Treasury Internal Revenue Service

General Information

10b If 'Yes,' list the state where the organization files reports:

1 Name of organization	Employer identification number				
Heartland PAC 20 - 2670155					
2 Mailing address (P.O. box or number, st	reet, and room or suite number)				
2813 Virginia Place					
City or town, state, and ZIP code					
Des Moines, IA 50321 -					
3 Check applicable box: Initial	notice <u>✓</u> Amended notice <u>✓</u> Final notice				
4a Date established	4b Date of material change				
04/29/2005	01/16/2009				
5 E-mail address of organization					
chc02@mchsi.com					
Name of custodian of records 6b Custodian's address					
Theresa Kehoe	2813 Virginia Place				
	Des Moines, IA 50321 -				
7a Name of contact person	7b Contact person's address				
Theresa Kehoe	2813 Virginia Place				
	Des Moines, IA 50321 -				
8 Business address of organization (if dif	ferent from mailing address shown above). Number, street, and room or suite number				
2813 Virginia Place					
City or town, state, and ZIP code					
Des Moines, IA 50321 -					
Election authority 9b Election authority identification number					
NONE					
Part II Notification of Claim	of Exemption From Filing Certain Forms (see instructions)				
10a Is this organization claiming exemption from filing Form 8872, Political Organization Report of Contributions and Expenditures, as a					
qualified state or local political organization? Yes No ⊻					

11 Is this organization claiming exemption from filing Form 990 (or 990-EZ), Return of Organization Exempt from Income Tax, as a caucus or associations of state or local officials? Yes _ No ✓

Part | Purpose

12 Describe the purpose of the organization

The purpose of the organization shall be to accept donations in order to make disbursements to directly or indirectly influence the selection, nomination, election or appointment of individuals to state or local public office.

Part IV	List of All Relate	d Entities (see instruction	s)		
13 Check if	the organization has no ı	related entities			
			<u>v</u>	<u> </u>	
14a Name	of related entity	14b Relationship	14c Address		
Part V	List of All Office	rs, Directors, and Highly	Compensated Employe	ees (see instructions)	
15a Name		15b Title	15c Address		
BJ Thornberry		Secretary	9405 Thornhill Rd		
			Silver Spring, MD 20901 -		
Jerry Crawfor	d	Treasurer	1701 Ruan Center		
			Des Moines, IA 50309	-	
	Internal Revenue Code,	and that I have examined this notice	e, including accompanying schedul	ax-exempt organization described in section 527 of the les and statements, and to the best of my knowledge sign this report, and I am signing by entering my name	
	Theresa Kehoe			01/16/2009	
0:					
Sign Here	Name of authorize	d official		Date	